Form 3160-5 (November 1994)

'D STATES Uì DEPARTMENT OF THE INTERIOR BURFALLOF LAND MANAGEMENT

		FORM APPROVED
_	ASAR	OMB No. 1004-013
()	2001	Expires July 31, 1996

	FORM A	PPRO	VED
	OMB No.	1004	013
Ļ	Expires Ju	lv 31.	199

ż	OMB No.	1004	-0135
4	Expires Ju	ly 31,	1996

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5.	Lease Serial No.	
т	C 02020ED	

SUNDRY NOTICES AND REPORTS ON WELLS 17 18 19 20 22				 5. Lease Serial No. LC-029395B 6. If Indian, Allottee or Tribe Name 		
	IPLICATE - Other Instr	ructions on reverse side	16° 252	7. If Unit o	or CA/Agreement, Name an	d/or No.
1. Type of Well Soil Well Gas Well	Other	ARIX	S/A 63/	8. Well Na		
2. Name of Operator MARBOB ENERGY CORPO	RATION	-2450	C 05.00	9. API Wei	DERAL #2	
3a. Address P.O. BOX 227, ARTES	IA. NM 88210	3b. Phone No. (include area 505-748-3303	code)	30-015-	-30268	
4. Location of Well (Footage, Sec.				10. Field and Pool, or Exploratory Area LOCO HILLS PADDOCK		1
1650 FNL 990 FWL,	SEC. 20-T17S-R31E	UNIT E			or Parish, State	
12. CHECK AP	PROPRIATE BOX(ES) T	O INDICATE NATURE O	F NOTICE, RI	EPORT, OF	R OTHER DATA	
TYPE OF SUBMISSION		ТҮРЕ О	F ACTION			
Notice of Intent Subsequent Report Final Abandonment Notice	Acidize Alter Casing Casing Repair Change Plans Convert to Injection	Deepen Fracture Treat New Construction Plug and Abandon Plug Back	Production (Start Reclamation Recomplete Temporarily Aba Water Disposal		Water Shut-Off Well Integrity Other	
following completion of the invitesting has been completed. Fit determined that the site is ready	etionally of recomplete horizonts he work will be performed or properties olved operations. If the operational Abandonment Notices shall for final inspection.)	rtinent details, including estimated tally, give subsurface locations and rovide the Bond No. on file with lon results in a multiple completion be filed only after all requirement above well on 8/23/	i measured and tru BLM/BIA. Requir or recompletion i ts, including recla	red subsequent	ths of all pertinent markers treports shall be filed with	and zones. hin 30 days
Due to th we have e	e low price of oil lected not to comp olved within 6 mor	l and a dispute wit plete this well at t nths, and the compl	h Conoco g his time.	This ho	pefully	

14. I hereby certify that the foregoing is true and correct	1				
Name (Printed/Typed)	Title				
Robin Cockrum	Production Ana	lyst			
Signature Cocknum	Date 2/17/99				
THIS SPACE FOR FEDERAL OR STATE OFFICE USE					
Approved by	Title	Date			
Conditions of approval, if any, are attached. Approval of this notice does not wat certify that the applicant holds legal or equitable title to those rights in the subjective which would entitle the applicant to conduct operations thereon.	rrant or office ct lease				